



COMMISSIONER  
Chris Traylor

April 5, 2012

John O'Brien, Director  
Legislative Budget Board  
P.O. Box 12666  
Austin, TX 78711-2666

Subject: Fiscal Year 2012 February Monthly Financial Report

Dear Mr. O'Brien:

The following is a narrative summary of budget adjustments processed during February 2012, as well as, budget variances and other key budget issues at this time.

#### BUDGET ADJUSTMENTS

In total, the Department of Aging and Disability Services (DADS) fiscal year 2012 Operating budget is \$6,252.7 million in All Funds (\$2,522.2 million in General Revenue/General Revenue Dedicated Funds), which is \$34.2 million in All Funds above the fiscal year 2012 appropriation of \$6,218.5 million in All Funds, as stated in the Eighty-second Legislature, Conference Committee, Stage 12, 2012-13 Biennium, dated May 22, 2011. For fiscal year 2012, the adjustments are related to three significant initiatives that affected DADS' operating budget:

- The carry-forward of the unexpended balance authority for the Service Authorization System/Client Assignment and Registration System (SAS/CARE) Consolidation Project. Pursuant to Rider 42, House Bill 1, 82<sup>nd</sup> Legislature, 2012-13 General Appropriations Act (GAA), DADS submitted a letter dated October 3, 2011, requesting approval to carry forward the unexpended balance of the SAS/CARE Consolidation Project (\$6.6 million in All Funds and \$0.7 million in General Revenue Funds). The letter was approved by the Legislative Budget Board (LBB) and the Governor's Office of Budget, Planning and Policy (GOBPP), and the fiscal year 2012 Operating Budget reflects the adjustment.
- The transfer of funds from the Health and Human Services Commission (HHSC) to DADS for Enterprise Support Services pursuant to Article II, Special Provisions, Section 10-Limitations on Transfer Authority, House Bill 1, 82<sup>nd</sup> Legislature, 2012-13 General Appropriations Act (GAA) for the HHS HR/Payroll System Upgrade project. HHSC submitted a letter dated September 13, 2011, requesting the transfer of funds to DADS, and the letter was approved by LBB and the GOBPP, and the fiscal year 2012 Operating Budget reflects the adjustment (\$2,536,149 in All Funds and \$1,094,348 in General Revenue Funds).
- A federal increase which related to aligning Federal Funds with available General Revenue Funds.

## BUDGET VARIANCES

As of February 29, 2012, DADS is projecting a fiscal year 2012 deficit of \$263.2 million in All Funds (\$105.5 million in General Revenue). Projected expenditures for Medicaid entitlement client services are based upon caseload forecasts prepared by HHSC in October 2011 and payment data through December 2011.

As a result of the updated forecast, there is a significant change from September's annual projections to February's annual projections. The key differences are:

- Current projections assume a cost trend growth in strategies A.2.1 Primary Home Care (PHC); A.2.2 Community Attendant Services (CAS); A.2.3 Day Activity and Health Services (DAHS); A.3.1 Community Based Alternatives (CBA); A.3.2 Home and Community Based Services (HCS); and A.6.1 Nursing Facility (NF), based upon expenditure data collected through November 2011. The September 2011 estimate only assumed cost growth for NFs.
- For CBA, since no additional slots were funded, a higher proportion of slots are being used by children aging out of the Medically Dependent Children Program (MDCP) waiver as well as the Comprehensive Care program. This population has higher costs than the average CBA population. For HCS, all of the new slots as well as the vast majority of replacement slots are being filled by individuals relocating out of ICFs or SSLCs. The larger portion of these individuals goes into residential settings, which are the higher cost settings.
- The waiver slots for Deaf-Blind Multiple Disabilities (DBMD) have been increased by eight above appropriated in order to meet maintenance-of-effort requirements. The number of individuals served in Community Living Assistance & Support (CLASS) is projected to exceed the appropriated level. The appropriated level was based upon the number of individuals being served in February 2011; however, for CLASS there were many individuals "still in the pipeline" in February 2011.

## VARIANCES DETAILED BY STRATEGIES

- **Strategy A.2.1, Primary Home Care** - This strategy is now projected to have a positive variance of \$9.5 million in All Funds which includes \$3.9 million in General Revenue Funds. The variance relates to a decrease in the number of individuals served per month from 31,240, as found in HB 1, to the current forecast of 29,773, a difference of 1,467. This is partially offset by an increase in the average monthly cost per individual served from \$830.90 to the current forecast of \$842.46, a difference of \$11.56.
- **Strategy A.2.2, Community Attendant Services** - This strategy is now projected to have a negative variance of \$5.1 million in All Funds which includes \$2.1 million in General Revenue Funds. The variance relates to the average monthly cost per individual served which increased

from \$834.21 per month, as found in HB 1, to the current forecast of \$874.80, a difference of \$40.59. This is partially offset by a decrease in the average number of individuals served per month from 48,617 to the current forecast of 46,848, a difference of 1,769.

- **Strategy A.2.3, Day Activity and Health Services** - This strategy is now projected to have a negative variance of \$2.0 million in All Funds, which includes \$0.8 million in General Revenue Funds. The variance relates to the average monthly cost per individual served which increased from \$526.50 per month as found in HB 1, to the current forecast of \$544.75, a difference of \$18.25. This is partially offset by a decrease in the average number of individuals served per month from 9,716 to 9,660, a difference of 56.
- **Strategy A.3.1, Community Based Alternatives** - This strategy is projected to have a negative variance of \$25.2 million in All Funds which includes \$10.5 million in General Revenue Funds. The variance relates to the average monthly cost per individual served which increased from \$1,320.19 per month as found in HB 1, to the current forecast of \$1,456.00, a difference of \$135.81. The average number of individuals served per month remained the same at 14,616.
- **Strategy A.3.2, Home and Community Based Services** – This strategy is projected to have a negative variance of \$27.3 million in All Funds which includes \$11.7 million in General Revenue Funds. The variance relates to the average monthly cost per individual served which increased from \$3,280.22 as found in HB 1, to the current forecast of \$3,414.55, a difference of \$134.33. The average monthly number of consumers served increased from 20,123 to 20,167, a difference of 44, all of whom are a result of the transfer of individuals from the expired Consolidated Waiver Program.
- **Strategy A.3.3, Community Living Assistance Support Services** – This strategy is projected to have a negative variance of \$15.8 million in All Funds which includes \$6.6 million in General Revenue Funds. The variance relates to the average monthly cost per individual served which increased from \$3,232.17 as found in HB 1, to the current forecast of \$3,345.15, a difference of \$112.98. The average monthly number of individuals served increased from 4,619 to 4,858, a difference of 239, 24 of whom are a result of the transfer of individuals from the expired Consolidated Waiver Program.
- **Strategy A.3.6, Consolidated Waiver Program** – This strategy is projected to have a positive variance of \$2.8 million in All Funds which includes \$1.1 million in General Revenue Funds. The variance relates to the fact that the program was eliminated December 31, 2011 and the expenditures and projections for January through August for FY 2012 were moved to the associated strategies. Because the budget cannot be moved until LBB and GOBPP approval is received, there is an artificial variance.
- **Strategy A.3.7, Texas Home Living Waiver** - This strategy is projected to have a negative variance of \$1.8 million in All Funds which includes \$0.8 million in General Revenue Funds. The variance relates to the average monthly cost per individual served which increased from

\$652.25 as found in HB 1, to the current forecast of \$679.13, a difference of \$26.88. The average monthly number of individuals served remained the same at 5,738.

- **Strategy A.6.1, Nursing Facility Payments** - This strategy is projected to have a negative variance of \$197.1 million in All Funds which includes \$81.1 million in General Revenue Funds. The variance relates to the net nursing facility cost per Medicaid resident per month served which increased from \$2,981.92 per month as found in HB 1, to the current forecast of \$3,185.18, a difference of \$203.26. The average number of individuals served per month increased from 56,213 to 56,599, a difference of 386.
- **Strategy A.6.2, Medicare Skilled Nursing Facility** - This strategy is projected to have a positive variance of \$10.2 million in All Funds which includes \$4.2 million in General Revenue Funds. The variance relates to the net payment per individual for co-paid Medicaid/Medicare nursing facility services per month which decreased from \$2,055.93 per month as found in HB 1, to the current forecast of \$2,029.58, a difference of \$26.35. The average number of individuals served per month decreased from 6,767 to 6,370, a difference of 397.
- **Strategy A.6.3, Hospice** - This strategy is projected to have a positive variance of \$4.9 million in All Funds which includes \$2.0 million in General Revenue Funds. The variance relates to the average net payment for individuals serviced per month which increased from \$2,739.58 per month as found in HB 1, to the current forecast of \$2,789.27, a difference of \$49.69. The average number of individuals served per month decreased from 7,039 to 6,741, a difference of 298.
- **Strategy A.6.4, Promoting Independence Services** - This strategy is projected to have a positive variance of \$2.8 million in All Funds which includes \$1.4 million in General Revenue Funds. The variance relates to the average monthly cost per individual served which decreased from \$1,487.75 per month as found in HB 1, to the current forecast of \$1,471.31, a difference of \$16.44. The average number of individuals served per month decreased from 6,318 to 6,301, a difference of 17.
- **Strategy A.7.1, Intermediate Care Facilities – (ICFs)** - This strategy is projected to have a negative variance of \$2.1 million in All Funds which includes \$0.9 million in General Revenue Funds. The variance relates to the monthly cost per ICF Medicaid eligible consumer served which decreased from \$4,360.27 per month as found in HB 1, to the current forecast of \$4,358.28, a difference of \$1.99. The average number of individuals served per month increased from 5,602 to 5,604, a difference of 2.
- **Strategy A.8.1, State Supported Living Centers** - This strategy is projected to have a negative variance of \$18.6 million in All Funds which includes \$6.6 million in General Revenue Funds. The average monthly cost per ID campus resident served decreased from \$14,107.11 per month as found in HB 1 to the current forecast of \$13,846.87, a difference of \$260.24. The average monthly number of residents served per month increased from 3,831 to 3,903, a difference of 72.

#### OTHER KEY BUDGET ISSUES

The following items have not been included in the current forecast, but may impact future projections:

- We did not reduce the cost containment savings estimate for the 90<sup>th</sup> percentile service cap (75<sup>th</sup> percentile for CLASS specialized therapies), although the ability of individuals to obtain health and safety exceptions may significantly reduce the amount of savings realized.
- No estimate of savings from Electronic Visit Verification has been included.
- The Social Security cost-of-living adjustment of 3.6 percent in January 2012 will increase the amount of applied income, which will reduce the NF projections slightly. In addition, the actual Medicare SNF coinsurance rate for the fiscal year 2012 rate was set at \$144.50 per day, compared to an estimated amount of \$145.50 per day assumed for this estimate.
- As already noted in the September MFR for fiscal year 2013, the DADS' Medicaid Entitlement programs are funded at 28 percent of the anticipated demand. The biennial budget deficit is now projected to be \$3.0 billion in All Funds which includes \$1.2 billion in General Revenue Funds. This current estimated shortfall does not include the amount related to House Bill 1, 82<sup>nd</sup> Legislature, 2012-13 General Appropriations Act (GAA), Art IX, Section 18.12, Additional Funding for Medicaid of \$112.9 million in General Revenue, or the additional Federal revenue amount of \$45.2 million, as the result of the more favorable FMAP rate for fiscal year 2013, based on current House Bill 1 appropriations.

#### **Transactions submitted to and awaiting LBB/GOBPP approval as of February 29, 2012:**

- The budget and FTE transfer authority from the Department of Assistive and Rehabilitative Services (DARS) to DADS pursuant to Article II, Special Provisions, Section 10-Limitations on Transfer Authority, related to health and human services (HHS) media service for DADS' strategy C.1.1 Central Administration.
- The budget transfer authority relating to the elimination of the Consolidated Waiver Program (Rider 35-Elimination of Consolidated Waiver Programs, Rider 9-Limitation: Medicaid Transfer Authority and Rider 34.-Limits for Waivers and Other Programs).

#### **DADS will be requesting approval for the following:**

- The transfer authority between strategies in fiscal year 2012 to offset deficit in client service within the existing appropriations (Rider 9-Limitation: Medicaid Transfer Authority and Rider 34-Limits for Waivers and Other Programs) estimated at \$32.0 million in All Funds (\$13.2

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million in General Revenue Funds), for Strategies A.2.1 Primary Home Care (PHC); A.3.5 Medically Dependent Children Program (MDCP); A.6.2 Medicare Skilled Nursing Facility; A.6.3 Hospice; and A.6.4 Promoting Independence Services.

- The authority to carry-back funds from fiscal year 2013 to fiscal year 2012 to cover budget shortfalls in fiscal year 2012 and exemption from the \$50 million transfer limit (Rider 11-Appropriation Transfer between Fiscal Years, Rider 9- Limitation: Medicaid Transfer Authority, and Rider 34-Limits for Waivers and Other Programs) estimated at \$250.4 million in All Funds (\$98.6 million in General Revenue Funds). (See Schedule 1).
- The authority to exceed the appropriation in all waiver programs based on the latest forecast with the exception of Medically Dependent Children Program (MDCP) in order to maintain the performance level targets (Rider 34-Limits for Waivers and Other Programs).
- As a result of the unexpected expenditures relating to the gas leak at the Austin State Supported Living Center, DADS will be requesting authority to expend an amount not to exceed \$5 million of the General Revenue Dedicated Quality Assurance Account (QAF). DADS will be notifying the Legislative Budget Board (LBB) and Governor's Office of Budget, Planning, and Policy (GOBPP) with a plan of how the funds will be expended. The federal portion will be drawn during the annual SSLC cost settlement process is completed and will not be collected until the Spring of 2013. Therefore, DADS will require sufficient funding for cash flow purposes to adequately support the SSLC budget until the actual federal revenue is received.

Please let me know if you have any questions or need additional information. I will serve as the lead staff on this matter and can be reached by phone at (512) 438-3355 or by e-mail at [gordon.taylor@dads.state.tx.us](mailto:gordon.taylor@dads.state.tx.us).

Sincerely,



Gordon Taylor  
Chief Financial Officer

GT:rb

Enclosure

cc: Chris Traylor, Commissioner  
Tom Suehs, Executive Commissioner HHSC  
Greta Rymal, Deputy Executive Commissioner HHSC  
Jonathan Hurst, Director, Governor's Office of Budget, Planning and Policy

**Department of Aging and Disability Services  
FY 2012 Attachment A: Budget Adjustments  
Data Through the End of February 2012**

	General Revenue	GR - Dedicated	Federal	Other	Total
<b>Adjustments to the FY 2012 Operating Budget:</b>					
<b>Appropriated Funds</b>	<b>\$2,518,949,139</b>	<b>\$62,061,125</b>	<b>\$3,613,620,416</b>	<b>\$23,889,249</b>	<b>\$6,218,519,929</b>
Carry forward of SAS/CARE Capital authority from 2010-11	\$661,702	\$0	\$5,955,320	\$0	\$6,617,022
Federal Funds Adjustment	\$0	\$0	\$483,584	\$0	\$483,584
Federal Funds Adjustment - Relating to Program Transfers (1.8.1 to 2.1.1)	\$0	\$0	(\$2,208,189)	\$0	(\$2,208,189)
GR Certified Match for Medicaid reclassified to GR Match for Medicaid	(\$710,034)	\$0	\$0	\$0	(\$710,034)
GR Match for Medicaid reclassified from GR Certified Match for Medicaid	\$710,034	\$0	\$0	\$0	\$710,034
Program Transfer (Art. IX between Strategies not included in Rider 9)	\$0	\$0	\$0	\$0	\$0
Reductions from Appropriations for DCS	(\$145,837)	\$0	(\$205,155)	(\$9,813)	(\$360,805)
SB 102 Benefit Replacement Pay (BRP)	\$1,491,697	\$0	\$2,185,123	\$13,179	\$3,689,999
SB 223 - Relating to licensing, regulation HCSSA and Admin providing penalties	\$142,378	\$0	\$40,765	\$0	\$183,143
<b>Revised Operating Budget, September 2011</b>	<b>\$2,521,099,079</b>	<b>\$62,061,125</b>	<b>\$3,619,871,865</b>	<b>\$23,892,615</b>	<b>\$6,226,924,684</b>
Federal Funds Adjustment	\$0	\$0	(\$260,637)	\$0	(\$260,637)
<b>Revised Operating Budget, October 2011</b>	<b>\$2,521,099,079</b>	<b>\$62,061,125</b>	<b>\$3,619,611,228</b>	<b>\$23,892,615</b>	<b>\$6,226,664,047</b>
Federal Funds Adjustment	\$0	\$0	\$9,329,007	\$0	\$9,329,007
GR Certified Match for Medicaid reclassified to GR Match for Medicaid	\$710,034	\$0	\$0	\$0	\$710,034
GR Match for Medicaid reclassified from GR Certified Match for Medicaid	(\$710,034)	\$0	\$0	\$0	(\$710,034)
Program Transfer (Art. IX between Strategies not included in Rider 9)	\$0	\$0	\$0	\$0	\$0
<b>Revised Operating Budget, November 2011</b>	<b>\$2,521,099,079</b>	<b>\$62,061,125</b>	<b>\$3,628,940,235</b>	<b>\$23,892,615</b>	<b>\$6,235,993,054</b>
Federal Funds Adjustment	\$0	\$0	\$906,038	\$0	\$906,038
GR Match for Medicaid reclassified to GR	(\$527,494)	\$0	\$0	\$0	(\$527,494)
GR reclassified from GR Match for Medicaid	\$527,494	\$0	\$0	\$0	\$527,494
<b>Revised Operating Budget, December 2011</b>	<b>\$2,521,099,079</b>	<b>\$62,061,125</b>	<b>\$3,629,846,273</b>	<b>\$23,892,615</b>	<b>\$6,236,899,092</b>
Federal Funds Transfer from HHSC - HR/Payroll System upgrade	\$0	\$0	\$1,441,801	\$0	\$1,441,801
GR Transfer from HHSC - HR/Payroll System upgrade	\$1,094,348	\$0	\$0	\$0	\$1,094,348
<b>Revised Operating Budget, January 2012</b>	<b>\$2,522,193,427</b>	<b>\$62,061,125</b>	<b>\$3,631,288,074</b>	<b>\$23,892,615</b>	<b>\$6,239,435,241</b>
Federal Funds Adjustment	\$0	\$0	\$13,259,065	\$0	\$13,259,065
Other Funds Adjustment - Appropriated Receipts and IAC	\$0	\$0	\$0	\$0	\$0
<b>Revised Operating Budget, February 2012</b>	<b>\$2,522,193,427</b>	<b>\$62,061,125</b>	<b>\$3,644,547,139</b>	<b>\$23,892,615</b>	<b>\$6,252,694,306</b>

**Department of Aging and Disability Services**  
**FY 2012 Monthly Financial Report: Strategy Budget and Variance, All Funds**  
**Data Through the End of February 2012**

	Budget						
	Appropriated	Adjustments	Notes	Op Bgt.	Expend. YTD	Projected	Variance
A.1.1 Intake, Access and Eligibility to Services and Supports	\$184,877,580	\$4,253,223	A,B,F	\$189,130,803	\$94,954,764	\$189,130,803	\$0
A.1.2 Guardianship	\$6,995,223	\$25,675	A	\$7,020,898	\$3,457,792	\$7,020,898	\$0
A.2.1 Primary Home Care	\$311,484,070	(\$939,279)	B	\$310,544,791	\$260,352,637	\$301,053,557	\$9,491,234
A.2.2 Community Attendant Services (Formerly Frail Elderly)	\$486,682,976	\$135,757	B	\$486,818,733	\$241,583,081	\$491,895,069	(\$5,076,336)
A.2.3 Day Activity and Health Services (DAHS)	\$61,384,145	(\$244,003)	B	\$61,140,142	\$57,671,050	\$63,146,802	(\$2,006,660)
A.3.1 Community Based Alternatives (CBA)	\$231,542,467	(\$469,635)	B	\$231,072,832	\$177,521,395	\$256,256,645	(\$25,183,813)
A.3.2 Home and Community Based Services (HCS)	\$792,081,944	\$6,957,481	B	\$799,039,425	\$398,933,763	\$826,334,757	(\$27,295,332)
A.3.3 Community Living Assistance & Support Services (CLASS)	\$179,152,968	\$37,402	B	\$179,190,370	\$97,249,683	\$195,020,597	(\$15,830,227)
A.3.4 Deaf-Blind Multiple Disabilities (DBMD)	\$7,371,823	\$1,453	B	\$7,373,276	\$3,614,179	\$7,955,515	(\$582,239)
A.3.5 Medically Dependent Children Program (MDCP)	\$41,946,865	\$8,433	B	\$41,955,298	\$20,274,576	\$41,881,650	\$73,648
A.3.6 Consolidated Waiver Program	\$3,780,346	\$746	B	\$3,781,092	\$1,026,844	\$1,027,810	\$2,753,282
A.3.7 Texas Home Living Waiver	\$44,911,397	\$8,853	B	\$44,920,250	\$16,304,036	\$46,762,016	(\$1,841,766)
A.4.1 Non-Medicaid Services	\$145,516,181	\$7,578,218		\$153,094,399	\$78,038,135	\$153,170,106	(\$75,708)
A.4.2 Mental Retardation Community Services	\$75,000,000	\$0		\$75,000,000	\$50,993,055	\$72,887,250	\$2,112,750
A.4.3 Promoting Independence Plan	\$4,818,281	(\$656,744)	B	\$4,161,537	\$1,225,767	\$4,161,537	\$0
A.4.4 In-Home and Family Support	\$4,989,907	\$0		\$4,989,907	\$2,354,710	\$4,989,907	\$0
A.5.1 Program of All-inclusive Care for the Elderly (PACE)	\$37,550,176	\$9,559	B	\$37,559,735	\$17,451,557	\$37,535,813	\$23,922
A.6.1 Nursing Facility Payments	\$2,011,480,976	\$1,719,008	B,E	\$2,013,199,984	\$1,096,029,635	\$2,210,262,403	(\$197,062,419)
A.6.2 Medicare Skilled Nursing Facility	\$166,956,355	\$66,690	B	\$167,023,045	\$74,969,974	\$156,852,673	\$10,170,372
A.6.3 Hospice	\$231,407,223	\$55,507	B	\$231,462,730	\$109,956,678	\$226,559,006	\$4,903,724
A.6.4 Promoting Independence Services	\$112,790,001	\$1,276,937	B	\$114,066,938	\$56,411,989	\$111,259,042	\$2,807,896
A.7.1 Intermediate Care Facilities - Mental Retardation (ICF/MR)	\$293,123,363	(\$2,838,090)	A,B	\$290,285,273	\$145,816,964	\$292,346,231	(\$2,060,958)
A.8.1 State Supported Living Centers (SSLC)	\$648,574,310	\$1,476,228	A,B	\$650,050,538	\$320,666,709	\$668,607,697	(\$18,557,159)
A.9.1 Capital Repairs and Renovations	\$352,186	\$0		\$352,186	\$207,045	\$352,186	\$0
<b>Subtotal, Goal A: Long Term Services and Supports</b>	<b>\$6,084,770,763</b>	<b>\$18,463,418</b>		<b>\$6,103,234,181</b>	<b>\$3,327,066,018</b>	<b>\$6,366,469,971</b>	<b>(\$263,235,790)</b>
B.1.1 Facility and Community-Based Regulation	\$62,510,903	\$9,281,508	A,B,C	\$71,792,411	\$37,251,591	\$71,792,411	\$0
B.1.2 Credentialing/Certification	\$1,274,532	(\$5,007)	A,B	\$1,269,525	\$589,567	\$1,269,525	\$0
B.1.3 Quality Outreach	\$5,080,203	\$625,676	A,B	\$5,705,879	\$2,973,381	\$5,705,879	\$0
<b>Subtotal, Goal B: Regulation, Certification and Outreach</b>	<b>\$68,865,638</b>	<b>\$9,902,177</b>		<b>\$78,767,815</b>	<b>\$40,814,539</b>	<b>\$78,767,815</b>	<b>\$0</b>
C.1.1 Central Administration	\$29,904,976	\$1,764,217	A,B	\$31,669,193	\$15,828,783	\$31,669,193	\$0
C.1.2 Information Technology Program Support	\$34,978,552	\$4,044,565	A,B,D,G	\$39,023,117	\$22,226,772	\$39,023,117	\$0
<b>Subtotal, Goal C: Indirect Administration</b>	<b>\$64,883,528</b>	<b>\$5,808,781</b>		<b>\$70,692,309</b>	<b>\$38,055,555</b>	<b>\$70,692,309</b>	<b>\$0</b>
<b>GRAND TOTAL, DADS</b>	<b>\$6,218,519,929</b>	<b>\$34,174,377</b>		<b>\$6,252,694,306</b>	<b>\$3,405,936,113</b>	<b>\$6,515,930,096</b>	<b>(\$263,235,790)</b>

**Notes:**

- A. SB 102 Benefit Replacement Pay (BRP)
- B. Federal Funds Adjustment
- C. Art IX Sec. 18.65, Contingency for SB 223 (2012-13 GAA)
- D. Art IX Sec 17.01, Data Center Services Reductions (2012-13 GAA)
- E. Art II, Rider 42, Unexpended Balance Authority for SAS/CARE Consolidation Project (2012-13 GAA)
- F. Art IX Sec 8.02, Fed Funds/Block Grants(2012-13 GAA)
- G. Art II, SP, Sec. 10, Limitations on Transfer Authority (2012-2013 GAA)
- ARRA Chronic Disease Management Program



**Department of Aging and Disability Services**  
**FY Monthly Financial Report: FTE Cap and Filled Positions**  
**Data Through the End of February 2012**

	Appropriated	Adjusted Cap	Budgeted	Filled Avg YTD	Filled Monthly
A.1.1 Intake, Access and Eligibility to Services and Supports	1,681.3	0.0	1,681.3	1,631.4	1,528.0
A.1.2 Guardianship	108.0	0.0	108.0	102.9	105.3
A.2.1 Primary Home Care					
A.2.2 Community Attendant Services (Formerly Frail Elderly)					
A.2.3 Day Activity and Health Services (DAHS)					
A.3.1 Community Based Alternatives (CBA)					
A.3.2 Home and Community Based Services (HCS)					
A.3.3 Community Living Assistance & Support Services (CLASS)					
A.3.4 Deaf-Blind Multiple Disabilities (DBMD)					
A.3.5 Medically Dependent Children Program (MDCP)					
A.3.6 Consolidated Waiver Program					
A.3.7 Texas Home Living Waiver					
A.3.8 Other Waivers					
A.4.1 Non-Medicaid Services					
A.4.2 Mental Retardation Community Services					
A.4.3 Promoting Independence Plan					
A.4.4 In-Home and Family Support					
A.4.5 Mental Retardation In-Home Services					
A.5.1 Program of All-inclusive Care for the Elderly (PACE)					
A.6.1 Nursing Facility Payments					
A.6.2 Medicare Skilled Nursing Facility					
A.6.3 Hospice					
A.6.4 Promoting Independence Services					
A.7.1 Intermediate Care Facilities - Mental Retardation (ICF/MR)	29.0	0.0	29.0	29.3	28.2
A.8.1 State Supported Living Centers (SSLC)	14,200.4	0.0	14,200.4	13,303.5	13,257.5
A.9.1 Capital Repairs and Renovations					
<b>Subtotal, Goal A: Long Term Services and Supports</b>	<b>16,018.7</b>	<b>0.0</b>	<b>16,018.7</b>	<b>15,067.4</b>	<b>14,919.1</b>
B.1.1 Facility and Community-Based Regulation	1,079.5	0.0	1,079.5	1,037.1	1,036.7
B.1.2 Credentialing/Certification	27.0	0.0	27.0	27.9	27.7
B.1.3 Quality Outreach	74.0	2.0	76.0	64.5	67.1
<b>Subtotal, Goal B: Regulation, Certification and Outreach</b>	<b>1,180.5</b>	<b>2.0</b>	<b>1,182.5</b>	<b>1,129.5</b>	<b>1,131.4</b>
C.1.1 Central Administration	365.4	0.0	365.4	365.6	363.5
C.1.2 Information Technology Program Support	97.8	0.0	97.8	113.1	108.8
C.1.3 Other Support Services	0.0	0.0			
<b>Subtotal, Goal C: Indirect Administration</b>	<b>463.2</b>	<b>0.0</b>	<b>463.2</b>	<b>478.8</b>	<b>472.2</b>
<b>GRAND TOTAL, DADS</b>	<b>17,662.4</b>	<b>2.0</b>	<b>17,664.4</b>	<b>16,675.7</b>	<b>16,522.7</b>

**Department of Aging and Disability Services**  
**FY 2012 Monthly Financial Report: Agency Budget and Variance, Detailed MOF**  
**Data Through the End of February 2012**

Method of Finance	ABEST Code/CFDA	Appropriated	Adjustments	Op Budget	Expend YTD	Projected	Variance
General Revenue 2008	Non-Fed	0	0	0	0	0	0
General Revenue	0001	148,625,478	818,449	149,443,927	83,013,432	146,484,410	2,959,517
GR-Match for Medicaid	0758	2,128,893,990	1,736,563	2,130,630,553	1,189,593,279	2,232,499,043	(101,868,491)
Earned Federal Funds	0888	0	0	0	0	0	0
EFF-Match for Medicaid	8091	0	0	0	0	0	0
GR for Fed Funds (OAA)	8004	4,282,380	0	4,282,380	12,457	4,282,380	0
GR Cert Match - Medicaid	8032	237,147,291	689,276	237,836,567	127,689,289	244,401,307	(6,564,740)
Supplemental: GR	8055	0	0	0	0	0	0
Payoff 07: General Revenue Fund	8109	0	0	0	0	0	0
80R SUPP: General Revenue Fund	8890	0	0	0	0	0	0
Supplemental: GR-Match Medicaid	8056	0	0	0	0	0	0
Payoff 07: GR Match for Medicaid	8110	0	0	0	0	0	0
80R SUPP: GR Match for Medicaid	8891	0	0	0	0	0	0
81R SUPP: General Revenue Fund	8900	0	0	0	0	0	0
81R SUPP: GR Match for Medicaid	8901	0	0	0	0	0	0
<b>Subtotal, General Revenue</b>		<b>2,518,949,139</b>	<b>3,244,288</b>	<b>2,522,193,427</b>	<b>1,400,308,457</b>	<b>2,627,667,140</b>	<b>(105,473,713)</b>
GR Ded-Tx Capital TF	0543	289,803	0	289,803	180,401	289,803	0
GR Ded-HCSSA	5018	1,948,343	0	1,948,343	946,432	1,948,343	0
Special Olympic Lic Plate	5055	1,500	0	1,500	0	1,500	0
GR Ded - QAF	5080	59,821,479	0	59,821,479	6,860,712	59,821,479	0
Waiver Pgm QAF	8101	0	0	0	0	0	0
Nursing Home QAF	8102	0	0	0	0	0	0
<b>Subtotal, General Revenue-Dedicated</b>		<b>62,061,125</b>	<b>0</b>	<b>62,061,125</b>	<b>7,987,545</b>	<b>62,061,125</b>	<b>0</b>
<b>Subtotal, GR-Related</b>		<b>2,581,010,264</b>	<b>3,244,288</b>	<b>2,584,254,552</b>	<b>1,408,296,002</b>	<b>2,689,728,265</b>	<b>(105,473,713)</b>
XIX ADM 50%	93.778.003	40,354,169	6,116,282	46,470,451	26,717,327	46,470,350	101
XIXADM 75%	93.778.004	19,042,420	(995,197)	18,047,223	10,592,884	17,214,846	832,378
XIXADM 90%	93.778.005	76,500	3,813,984	3,890,484	1,091,063	5,367,458	(1,476,975)
XIX FMAP	93.778.000	3,341,017,228	(9,256,531)	3,331,760,697	1,809,722,074	3,483,881,834	(152,121,137)
Title XX	93.667.000	88,840,273	109,235	88,949,508	51,668,099	88,949,508	0
School Breakfast Program	10.553.000	0	0	0	56,790	113,575	(113,575)
National School Lunch Program	10.555.000	0	113,575	113,575	0	0	113,575
Child & Adult Care Food Program	10.558.000	0	0	0	0	0	0
TITLE XVIII	93.777.000	27,692,377	82,419	27,774,796	13,741,577	27,774,796	0
SUR&C-75%	93.777.002	17,407,153	4,708,562	22,115,715	10,746,703	22,115,715	0
Foster Grandparent Pgm	94.011.000	2,088,893	6,175	2,095,068	978,874	1,959,879	135,189
CMS Res, Demo, & Eval	93.779.000	2,346,700	10,430,121	12,776,821	14,394,798	16,964,844	(4,188,023)
Spc Svcs Aging-VII3	93.041.000	377,737	(68,931)	308,806	114,514	308,806	0
Spc Svcs Aging-VII2	93.042.000	973,603	76,803	1,050,406	423,667	1,050,406	0
Spc Svcs Aging-IIID	93.043.000	1,334,413	(86,034)	1,248,379	673,776	1,270,643	(22,264)
Spc Svcs Aging-IIIB	93.044.000	23,154,603	3,043,508	26,198,111	13,834,285	26,198,111	0
Spc Svcs Aging-IIIC	93.045.000	28,145,487	9,178,477	37,323,964	19,715,724	37,887,140	(563,175)
Spc Svcs Aging-Discretionary	93.048.000	469,800	120,379	590,179	230,478	569,191	20,988
Natl Family Caregiver	93.052.000	9,325,188	(778,409)	8,546,779	4,187,864	8,818,532	(271,753)
Nutrition Svcs Incentive	93.053.000	10,973,872	1,489,777	12,463,649	4,737,725	12,549,601	(85,952)
ARRA AoA Grant to AAA's	93.725.000	0	415,304	415,304	230,278	415,304	0
MFP Demo	93.791.000	0	0	0	3,179	22,253	(22,253)
MIPPA AoA Grants	93.518.000	0	813,438	813,438	173,063	813,438	0
MIPPA AoA Grants	93.518.001	0	727,815	727,815	135,333	727,815	0
MIPPA CMS	93.779.000	0	672,460	672,460	111,288	672,460	0

**Department of Aging and Disability Services**  
**FY 2012 Monthly Financial Report: Agency Budget and Variance, Detailed MOF**  
**Data Through the End of February 2012**

<b>Method of Finance</b>	<b>ABEST Code/CFDA</b>	<b>Appropriated</b>	<b>Adjustments</b>	<b>Op Budget</b>	<b>Expend YTD</b>	<b>Projected</b>	<b>Variance</b>
Respite AoA	93.072.000	0	193,511	193,511	28,408	193,511	0
<b>Subtotal, Federal Funds</b>		<b>3,613,620,416</b>	<b>30,926,723</b>	<b>3,644,547,139</b>	<b>1,984,309,771</b>	<b>3,802,310,015</b>	<b>(157,762,876)</b>
Appropriated Receipts	0666	2,150,393	(1,776)	2,148,617	1,449,849	2,148,608	9
MR Collections	8095	17,266,929	4,282	17,271,211	9,159,643	17,270,544	668
MR Approp Recpts	8096	754,450	859	755,309	382,901	755,280	29
MR Medicare Recpts	8097	0	0	0	0	0	0
MR Revolving Fund	8098	82,160	0	82,160	0	82,160	0
Interagency Contracts	0777	3,635,317	0	3,635,317	2,337,948	3,635,224	93
Bond Proceeds-7605	0780	0	0	0	0	0	0
Bond Proceeds-7616	0780	0	0	0	0	0	0
Bond Proceeds-7620	0780	0	0	0	0	0	0
Bond Proceeds-7631	0780	0	0	0	0	0	0
Bond Proceeds-7210	0780	0	0	0	0	0	0
Bond Proceeds-7644	0780	0	0	0	0	0	0
Bond Proceeds-9999	0780	0	0	0	0	0	0
Medicare Part D Receipts	8115	0	0	0	0	0	0
<b>Subtotal, Other Funds</b>		<b>23,889,249</b>	<b>3,366</b>	<b>23,892,615</b>	<b>13,330,340</b>	<b>23,891,816</b>	<b>799</b>
<b>GRAND TOTAL, ALL FUNDS</b>		<b>6,218,519,929</b>	<b>34,174,377</b>	<b>6,252,694,306</b>	<b>3,405,936,113</b>	<b>6,515,930,096</b>	<b>(263,235,790)</b>

**Department of Aging and Disability Services**  
**FY 2012 Monthly Financial Report: Strategy Projections by MOF**  
**Data Through the End of February 2012**

	GR	GR-D	Federal Funds				Other Funds	All Funds
			93,778,000	93,667,000	Other CFDA	Subtotal FF		
A.1.1 Intake, Access and Eligibility to Services and Supports	\$74,111,985	\$0	\$75,376,001	\$6,582,724	\$31,262,162	\$113,220,887	\$1,797,930	\$189,130,803
A.1.2 Guardianship	\$0	\$0	\$0	\$7,020,898	\$0	\$7,020,898	\$0	\$7,020,898
A.2.1 Primary Home Care	\$125,178,069	\$0	\$175,875,488	\$0	\$0	\$175,875,488	\$0	\$301,053,557
A.2.2 Community Attendant Services (Formerly Frail Elderly)	\$204,529,970	\$0	\$287,365,099	\$0	\$0	\$287,365,099	\$0	\$491,895,069
A.2.3 Day Activity and Health Services (DAHS)	\$26,256,440	\$0	\$36,890,362	\$0	\$0	\$36,890,362	\$0	\$63,146,802
A.3.1 Community Based Alternatives (CBA)	\$106,622,944	\$0	\$149,633,701	\$0	\$0	\$149,633,701	\$0	\$256,256,645
A.3.2 Home and Community Based Services (HCS)	\$341,102,927	\$0	\$475,756,100	\$0	\$9,475,731	\$485,231,830	\$0	\$826,334,757
A.3.3 Community Living Assistance & Support Services (CLASS)	\$81,089,564	\$0	\$113,931,033	\$0	\$0	\$113,931,033	\$0	\$195,020,597
A.3.4 Deaf-Blind Multiple Disabilities (DBMD)	\$3,307,903	\$0	\$4,647,612	\$0	\$0	\$4,647,612	\$0	\$7,955,515
A.3.5 Medically Dependent Children Program (MDCP)	\$17,414,390	\$0	\$24,467,260	\$0	\$0	\$24,467,260	\$0	\$41,881,650
A.3.6 Consolidated Waiver Program	\$427,363	\$0	\$600,447	\$0	\$0	\$600,447	\$0	\$1,027,810
A.3.7 Texas Home Living Waiver	\$19,443,646	\$0	\$27,318,370	\$0	\$0	\$27,318,370	\$0	\$46,762,016
A.4.1 Non-Medicaid Services	\$15,056,699	\$0	\$0	\$74,645,861	\$63,467,547	\$138,113,408	\$0	\$153,170,106
A.4.2 Mental Retardation Community Services	\$72,885,750	\$1,500	\$0	\$0	\$0	\$0	\$0	\$72,887,250
A.4.3 Promoting Independence Plan	\$2,713,698	\$0	\$0	\$0	\$1,296,400	\$1,296,400	\$151,439	\$4,161,537
A.4.4 In-Home and Family Support	\$4,989,907	\$0	\$0	\$0	\$0	\$0	\$0	\$4,989,907
A.5.1 Program of All-inclusive Care for the Elderly (PACE)	\$15,607,391	\$0	\$21,928,422	\$0	\$0	\$21,928,422	\$0	\$37,535,813
A.6.1 Nursing Facility Payments	\$920,846,280	\$0	\$1,289,416,123	\$0	\$0	\$1,289,416,123	\$0	\$2,210,262,403
A.6.2 Medicare Skilled Nursing Facility	\$65,219,341	\$0	\$91,633,332	\$0	\$0	\$91,633,332	\$0	\$156,852,673
A.6.3 Hospice	\$94,203,235	\$0	\$132,355,771	\$0	\$0	\$132,355,771	\$0	\$226,559,006
A.6.4 Promoting Independence Services	\$45,546,642	\$0	\$62,988,750	\$0	\$2,723,651	\$65,712,400	\$0	\$111,259,042
A.7.1 Intermediate Care Facilities - Mental Retardation (ICF/MR)	\$94,704,640	\$26,821,479	\$170,750,055	\$0	\$0	\$170,750,055	\$70,057	\$292,346,231
A.8.1 State Supported Living Centers (SSLC)	\$247,070,429	\$33,000,000	\$367,827,722	\$0	\$2,095,707	\$369,923,429	\$18,613,839	\$668,607,697
A.9.1 Capital Repairs and Renovations	\$62,383	\$289,803	\$0	\$0	\$0	\$0	\$0	\$352,186
<b>Subtotal, Goal A: Long Term Services and Supports</b>	<b>\$2,578,391,597</b>	<b>\$60,112,782</b>	<b>\$3,508,761,647</b>	<b>\$88,249,483</b>	<b>\$110,321,198</b>	<b>\$3,707,332,327</b>	<b>\$20,633,265</b>	<b>\$6,366,469,971</b>
B.1.1 Facility and Community-Based Regulation	\$19,002,118	\$1,948,343	\$4,027,621	\$0	\$46,814,328	\$50,841,950	\$0	\$71,792,411
B.1.2 Credentialing/Certification	\$866,364	\$0	\$102,429	\$0	\$300,732	\$403,162	\$0	\$1,269,525
B.1.3 Quality Outreach	\$530,320	\$0	\$3,841,768	\$0	\$0	\$3,841,768	\$1,333,791	\$5,705,879
<b>Subtotal, Goal B: Regulation, Certification and Outreach</b>	<b>\$20,398,801</b>	<b>\$1,948,343</b>	<b>\$7,971,819</b>	<b>\$0</b>	<b>\$47,115,061</b>	<b>\$55,086,880</b>	<b>\$1,333,791</b>	<b>\$78,767,815</b>
C.1.1 Central Administration	\$12,535,906	\$0	\$16,164,969	\$375,601	\$1,252,735	\$17,793,306	\$1,339,981	\$31,669,193
C.1.2 Information Technology Program Support	\$16,340,836	\$0	\$20,036,052	\$324,424	\$1,737,026	\$22,097,502	\$584,778	\$39,023,117
<b>Subtotal, Goal C: Indirect Administration</b>	<b>\$28,876,742</b>	<b>\$0</b>	<b>\$36,201,021</b>	<b>\$700,025</b>	<b>\$2,989,761</b>	<b>\$39,890,808</b>	<b>\$1,924,759</b>	<b>\$70,692,309</b>
<b>GRAND TOTAL, DADS</b>	<b>\$2,627,667,140</b>	<b>\$62,061,125</b>	<b>\$3,552,934,487</b>	<b>\$88,949,508</b>	<b>\$160,426,020</b>	<b>\$3,802,310,015</b>	<b>\$23,891,816</b>	<b>\$6,515,930,096</b>

**Department of Aging and Disability Services**  
**FY 2012 Monthly Financial Report: Strategy Variance by MOF**  
**Data Through the End of February 2012**

	GR	GR-D	Federal Funds				Other Funds	All Funds
			93,778,000	93,667,000	Other CFDA	Subtotal, FF		
A.1.1 Intake, Access and Eligibility to Services and Supports	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
A.1.2 Guardianship	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
A.2.1 Primary Home Care	\$3,946,455	\$0	\$5,544,779	\$0	\$0	\$5,544,779	\$0	\$9,491,234
A.2.2 Community Attendant Services (Formerly Frail Elderly)	(\$2,110,741)	\$0	(\$2,965,595)	\$0	\$0	(\$2,965,595)	\$0	(\$5,076,336)
A.2.3 Day Activity and Health Services (DAHS)	(\$834,369)	\$0	(\$1,172,291)	\$0	\$0	(\$1,172,291)	\$0	(\$2,006,660)
A.3.1 Community Based Alternatives (CBA)	(\$10,471,431)	\$0	(\$14,712,383)	\$0	\$0	(\$14,712,383)	\$0	(\$25,183,813)
A.3.2 Home and Community Based Services (HCS)	(\$11,666,902)	\$0	(\$12,897,693)	\$0	(\$2,730,738)	(\$15,628,431)	\$0	(\$27,295,332)
A.3.3 Community Living Assistance & Support Services (CLASS)	(\$6,582,208)	\$0	(\$9,248,019)	\$0	\$0	(\$9,248,019)	\$0	(\$15,830,227)
A.3.4 Deaf-Blind Multiple Disabilities (DBMD)	(\$242,095)	\$0	(\$340,144)	\$0	\$0	(\$340,144)	\$0	(\$582,239)
A.3.5 Medically Dependent Children Program (MDCP)	\$30,623	\$0	\$43,025	\$0	\$0	\$43,025	\$0	\$73,648
A.3.6 Consolidated Waiver Program	\$1,144,815	\$0	\$1,608,467	\$0	\$0	\$1,608,467	\$0	\$2,753,282
A.3.7 Texas Home Living Waiver	(\$765,806)	\$0	(\$1,075,960)	\$0	\$0	(\$1,075,960)	\$0	(\$1,841,766)
A.4.1 Non-Medicaid Services	\$846,449	\$0	\$0	\$0	(\$922,157)	(\$922,157)	\$0	(\$75,708)
A.4.2 Mental Retardation Community Services	\$2,112,750	\$0	\$0	\$0	\$0	\$0	\$0	\$2,112,750
A.4.3 Promoting Independence Plan	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
A.4.4 In-Home and Family Support	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
A.5.1 Program of All-inclusive Care for the Elderly (PACE)	\$9,947	\$0	\$13,975	\$0	\$0	\$13,975	\$0	\$23,922
A.6.1 Nursing Facility Payments	(\$81,095,791)	\$0	(\$115,966,628)	\$0	\$0	(\$115,966,628)	\$0	(\$197,062,419)
A.6.2 Medicare Skilled Nursing Facility	\$4,228,841	\$0	\$5,941,531	\$0	\$0	\$5,941,531	\$0	\$10,170,372
A.6.3 Hospice	\$2,038,968	\$0	\$2,864,756	\$0	\$0	\$2,864,756	\$0	\$4,903,724
A.6.4 Promoting Independence Services	\$1,355,836	\$0	\$2,909,344	\$0	(\$1,457,285)	\$1,452,060	\$0	\$2,807,896
A.7.1 Intermediate Care Facilities - Mental Retardation (ICF/MR)	(\$854,632)	\$0	(\$1,206,326)	\$0	\$0	(\$1,206,326)	\$0	(\$2,060,958)
A.8.1 State Supported Living Centers (SSLC)	(\$6,564,422)	\$0	(\$12,106,473)	\$0	\$112,936	(\$11,993,537)	\$799	(\$18,557,159)
A.9.1 Capital Repairs and Renovations	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Subtotal, Goal A: Long Term Services and Supports</b>	<b>(\$105,473,713)</b>	<b>\$0</b>	<b>(\$152,765,632)</b>	<b>\$0</b>	<b>(\$4,997,243)</b>	<b>(\$157,762,876)</b>	<b>\$799</b>	<b>(\$263,235,790)</b>
B.1.1 Facility and Community-Based Regulation	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
B.1.2 Credentialing/Certification	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
B.1.3 Quality Outreach	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Subtotal, Goal B: Regulation, Certification and Outreach</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
C.1.1 Central Administration	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
C.1.2 Information Technology Program Support	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Subtotal, Goal C: Indirect Administration</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>GRAND TOTAL, DADS</b>	<b>(\$105,473,713)</b>	<b>\$0</b>	<b>(\$152,765,632)</b>	<b>\$0</b>	<b>(\$4,997,243)</b>	<b>(\$157,762,876)</b>	<b>\$799</b>	<b>(\$263,235,790)</b>

**Department of Aging and Disability Services  
0543 - Capital Trust Funds  
Data Through the End of February 2012**

	<u>Feb 12</u>	<u>FY12 Year to Date as of 02/29/12</u>
<b>Beginning Balance, 02/01/12</b>	<u>0</u>	<u>0</u>
<b>Reductions:</b>		
Expended	0	0
<b>Total Reductions</b>	<u>0</u>	<u>0</u>
<b>Ending Balance, 02/29/12</b>	<u><u>0</u></u>	<u><u>0</u></u>

**Department of Aging and Disability Services  
 0543 Unappropriated - Capital Trust Funds  
 Data Through the End of February 2012**

	<b>Feb 12</b>	<b>FY12 Year to Date as of 02/29/12</b>
<b>Beginning Balance, 02/01/12</b>	<b>23,992</b>	<b>23,992</b>
<b>Increases:</b>		
3321 Oil Royaltie	22,772	33,025
3746 Rental of Lan	36,102	46,602
3851 Int-State Dep&Treas Inv-Gener	354	3,593
<b>Total Increases</b>	<b>59,228</b>	<b>83,220</b>
<b>Reductions:</b>		
Expended	0	0
<b>Total Reductions</b>	<b>0</b>	<b>0</b>
<b>Ending Balance, 02/29/12</b>	<b>83,220</b>	<b>83,220</b>

**Department of Aging and Disability Services**  
**0666 - Appropriated Receipts**  
**Data Through the End of February 2012**

	<u>Feb 12</u>	<u>FY12 Year to Date as of 02/29/12</u>
<b>Beginning Balance, 02/01/12</b>	<b>0</b>	<b>0</b>
<b>Increases:</b>		
3557 Health Care Facilities Fee	125,163	741,680
3560 Medical Exam & Registratio	18,602	105,217
3719 Fees for Copies, Fil Re	199	1,359
<b>Total Increases</b>	<b><u>143,964</u></b>	<b><u>848,256</u></b>
<b>Reductions:</b>		
Expended	143,964	848,256
<b>Total Reductions</b>	<b><u>143,964</u></b>	<b><u>848,256</u></b>
<b>Ending Balance, 02/29/12</b>	<b><u><u>0</u></u></b>	<b><u><u>0</u></u></b>



**Department of Aging and Disability Services**  
**5080 - QAF**  
**Data Through the End of February 2012**

	<u>Feb 12</u>	<u>FY12 Year to Date as of 02/29/12</u>
<b>Beginning Balance, 02/01/12</b>	<b>0</b>	<b>0</b>
<b>Increases:</b>		
3557 Health Care Facilities Fee	4,641,295	26,126,597
3770 Administrative Penaltie	25,774	34,440
3851 Int-State Dep&Treas Inv-Gener	25,474	117,725
<b>Total Increases</b>	<b><u>4,692,543</u></b>	<b><u>26,278,762</u></b>
<b>Reductions:</b>		
Expended	4,692,543	26,278,762
<b>Total Reductions</b>	<b><u>4,692,543</u></b>	<b><u>26,278,762</u></b>
<b>Ending Balance, 02/29/12</b>	<b><u><u>0</u></u></b>	<b><u><u>0</u></u></b>

**Department of Aging and Disability Services  
8091 - EFF Match for Medicaid  
Data Through the End of February 2012**

	Feb 12	FY12 Year to Date as of 02/29/12
<b>Beginning Balance, 02/01/12</b>	<b>0</b>	<b>0</b>
<b>Reductions:</b>		
Expended	0	0
<b>Total Reductions</b>	<b>0</b>	<b>0</b>
<b>Ending Balance, 02/29/12</b>	<b>0</b>	<b>0</b>

**Department of Aging and Disability Services  
8095 - SMT  
Data Through the End of February 2012**

	<u>Feb 12</u>	<u>FY12 Year to Date as of 02/29/12</u>
<b>Beginning Balance, 02/01/12</b>	<b>0</b>	<b>0</b>
<b>Increases:</b>		
3606 Support/Maint of Patient	2,391,917	11,774,967
3618 Welfare/MHMR service fee	84	650
<b>Total Increases</b>	<b><u>2,392,001</u></b>	<b><u>11,775,617</u></b>
<b>Reductions:</b>		
Expended	2,392,001	11,775,617
<b>Total Reductions</b>	<b><u>2,392,001</u></b>	<b><u>11,775,617</u></b>
<b>Ending Balance, 02/29/12</b>	<b><u><u>0</u></u></b>	<b><u><u>0</u></u></b>

**Department of Aging and Disability Services  
8096 - MR Appropriated Receipts  
Data Through the End of February 2012**

	<u>Feb 12</u>	<u>FY12 Year to Date as of 02/29/12</u>
<b>Beginning Balance, 02/01/12</b>	<b>0</b>	<b>0</b>
<b>Increases:</b>		
3719 Fees for Copies, Fil Re	1,347	1,966
3753 Sale of Surplus Property Fe	831	1,167
3767 Supply, Equip, Service-Fed/Othe	172,348	271,333
3802 Reimbursements-Third Part	1,371	6,771
3806 Rental Of Housing To State Em	15,675	90,884
<b>Total Increases</b>	<b><u>191,572</u></b>	<b><u>372,121</u></b>
<b>Reductions:</b>		
Expended	191,572	372,121
<b>Total Reductions</b>	<b><u>191,572</u></b>	<b><u>372,121</u></b>
<b>Ending Balance, 02/29/12</b>	<b><u><u>0</u></u></b>	<b><u><u>0</u></u></b>

**Department of Aging and Disability Services  
8098 - MR Revolving Funds  
Data Through the End of February 2012**

	<u>Feb 12</u>	<u>FY12 Year to Date as of 02/29/12</u>
<b>Beginning Balance, 02/01/12</b>	<b>0</b>	<b>0</b>
<b>Increases:</b>		
3765 Sales Of Supplies/Equipment/S	0	1,168
3767 Supply,Equip,Service-Fed/Othe	22,141	55,394
<b>Total Increases</b>	<b><u>22,141</u></b>	<b><u>56,562</u></b>
<b>Reductions:</b>		
Expended	22,141	56,562
<b>Total Reductions</b>	<b><u>22,141</u></b>	<b><u>56,562</u></b>
<b>Ending Balance, 02/29/12</b>	<b><u><u>0</u></u></b>	<b><u><u>0</u></u></b>

**Department of Aging and Disability Services  
8115 - Medicare Part D Receipts  
Data Through the End of February 2012**

	<u>Feb 12</u>	<u>FY12 Year to Date as of 02/29/12</u>
<b>Beginning Balance, 02/01/12</b>	<u>0</u>	<u>0</u>
<b>Reductions:</b>		
Expended	0	0
<b>Total Reductions</b>	<u>0</u>	<u>0</u>
<b>Ending Balance, 02/29/12</b>	<u><u>0</u></u>	<u><u>0</u></u>

**Department of Aging and Disability Services  
Unappropriated - EFF  
Data Through the End of February 2012**

	<u>Feb 12</u>	<u>FY12 Year to Date as of 02/29/12</u>
<b>Beginning Balance, 02/01/12</b>	<b>2,794,221</b>	<b>2,794,221</b>
<b>Increases:</b>		
3702 Federal Receipts-Earned Credi	0	1,296
3851 Int-State Dep&Treas Inv-Gener	2,140	22,825
3965 Cash Transf Btn Fnds/Accts-Me	467,792	3,240,032
<b>Total Increases</b>	<b><u>469,932</u></b>	<b><u>3,264,153</u></b>
<b>Reductions:</b>		
Expended	0	0
<b>Total Reductions</b>	<b><u>0</u></b>	<b><u>0</u></b>
<b>Ending Balance, 02/29/12</b>	<b><u><u>3,264,153</u></u></b>	<b><u><u>3,264,153</u></u></b>

**Department of Aging and Disability Services**  
**FY 2012 Monthly Financial Report: Capital Projects**  
**Data Through the End of February 2012**

	Budget						
	Appropriated	Adjustments	Notes	Op Bgt.	Expend. YTD	Projected	Variance
<b>Capital Projects in Capital Rider</b>							
Community Services DataBase Portal Design	\$1,500,000	\$0		\$1,500,000	\$0	\$1,500,000	\$0
Data Center Consolidation	\$3,598,640	\$0		\$3,598,640	\$1,495,852	\$3,598,640	\$0
Lease of Personal Computers	\$3,965,874	\$0		\$3,965,874	\$1,031,819	\$3,965,874	\$0
Messaging & Collaboration	\$1,605,939	\$0		\$1,605,939	\$0	\$1,605,939	\$0
Payment of MLPP-Transportation	\$271,914	\$0		\$271,914	\$0	\$271,914	\$0
Payment of MLPP-Utility Savings	\$3,305,939	\$0		\$3,305,939	\$0	\$3,305,939	\$0
Repairs & Renovations	\$3,352,186	\$0		\$3,352,186	\$775,652	\$3,352,186	\$0
Replacement of Transportation Items	\$1,271,365	\$0		\$1,271,365	\$0	\$1,271,365	\$0
SAS/CARE Consolidation	\$4,909,368	\$1,707,654 A		\$6,617,022	\$409,419	\$6,617,022	\$0
Security Improvements	\$290,000	\$0		\$290,000	\$0	\$290,000	\$0
Software Licenses	\$1,701,400	\$0		\$1,701,400	\$1,520,264	\$1,701,400	\$0
Telecommunications Enhancements	\$1,082,445	\$0		\$1,082,445	\$0	\$1,082,445	\$0
<b>GRAND TOTAL</b>	<b>\$26,855,070</b>	<b>\$1,707,654</b>		<b>\$28,562,724</b>	<b>\$5,233,006</b>	<b>\$28,562,724</b>	<b>\$0</b>
<b>Method of Finance:</b>							
General Revenue	\$13,681,291	\$170,765		\$14,029,689	\$2,561,724	\$14,029,689	\$0
General Revenue-Dedicated	\$289,803	\$0		\$289,802	\$0	\$289,802	\$0
<i>Subtotal, GR-Related</i>	<i>\$13,971,094</i>	<i>\$170,765</i>		<i>\$14,319,491</i>	<i>\$2,561,724</i>	<i>\$14,319,491</i>	<i>\$0</i>
Federal Funds	\$12,587,332	\$1,536,889		\$13,939,950	\$2,592,088	\$13,939,950	\$0
Other Funds	\$296,644	\$0		\$303,283	\$79,194	\$303,283	\$0
<b>TOTAL, All Funds</b>	<b>\$26,855,070</b>	<b>\$1,707,654</b>		<b>\$28,562,724</b>	<b>\$5,233,006</b>	<b>\$28,562,724</b>	<b>\$0</b>

**Notes:**

A. The FY2012 SAS/CARE Consolidation Project operating budget was updated with current data and was adjusted accordingly. The revised amount of \$6,617,002 reflects the amount DADS submitted in a letter dated October 3, 2011 to the LBB/GOBPP, pursuant to Rider 42, House Bill 1, 82nd Legislature, 2012-13 General Appropriations Act (GAA).



**Department of Aging and Disability Services**  
**FY 2012 Monthly Financial Report: Select Performance Measures**  
**Data Through the End of February 2012**

Measure	HB 1	FY 2012 YTD Actual	FY 2012 Projected	Variance (HB 1 vs. Projected)
<b>Primary Home Care</b>				
Avg. # of clients served per month	31240	49050	29773	1467
Avg. cost per month	\$830.90	\$882.76	\$842.46	(\$11.56)
<b>CAS</b>				
Avg. # of clients served per month	48617	46534	46848	1769
Avg. cost per month	\$834.21	\$862.44	\$874.80	(\$40.59)
<b>DAHS</b>				
Avg. # of clients served per month	9716	17692	9660	56
Avg. cost per month	\$526.50	\$543.28	\$544.75	(\$18.25)
<b>CBA Waiver</b>				
Average # of CBA clients served per month	14616	19141	14616	0
Average Monthly Cost of CBA Clients	\$1,320.19	\$1,540.92	\$1,456.00	(\$135.81)
<b>HCS Waiver</b>				
Average Monthly Number of Consumers Served in the HCS Waiver Program	20123	19799	20167	(44)
Average Monthly Cost Per Consumer Served in the HCS Waiver Program	\$3,280.22	\$3,358.20	\$3,414.55	(\$134.33)
<b>CLASS Waiver</b>				
Average # of CLASS Waiver clients served per month	4619	4714	4858	(239)
Average Monthly Cost of CLASS Waiver Clients	\$3,232.17	\$3,436.24	\$3,345.15	(\$112.98)
<b>DBMD Waiver</b>				
Average # of DBMD Waiver clients served per month	148	146	157	(9)
Average Monthly Cost of DBMH clients	\$4,150.80	\$4,116.38	\$4,230.63	(\$79.83)
<b>MDCP Waiver</b>				
Average # of MDCP clients served per month	2380	2330	2396	(16)
Average Monthly Cost of MDCP clients	\$1,468.73	\$1,450.36	\$1,456.57	\$12.16
<b>Consolidated Waiver Program</b>				
Average # of CWP clients served per month	154	75	38	116
Average Monthly Cost of CWP clients	\$2,045.64	\$2,288.98	\$2,288.44	(\$242.80)
<b>TxHmL Waiver</b>				
Average Monthly Number of Consumers Served in the TxHmL Waiver Program	5738	3648	5738	0
Average Monthly Cost Per Consumer Served in the TxHmL Waiver Program	\$652.25	\$738.10	\$679.13	(\$26.88)

**Department of Aging and Disability Services  
FY 2012 Monthly Financial Report: Select Performance Measures  
Data Through the End of February 2012**

Measure	HB 1	FY 2012 YTD Actual	FY 2012 Projected	Variance (HB 1 vs. Projected)
<b>Non-Medicaid Services - Title XX</b>				
Average number of clients served per month: Non-Medicaid Community Care (XX)	35377	34349	32985	2392
Average monthly cost per client served: Non-Medicaid Community Care (XX)	\$211.80	\$222.58	\$222.43	(\$10.63)
<b>Program of All-Inclusive Care for the Elderly (PACE)</b>				
Average number of recipients per month: Program for All Inclusive Care (PACE)	1091	1011	1091	0
Average monthly cost per recipient: Program for All Inclusive Care (PACE)	\$2,867.08	\$2,876.00	\$2,867.08	\$0.00
<b>Promoting Independence</b>				
Avg. # of clients served per month	6318	6231	6301	17
Avg. cost per month	\$1,487.75	\$1,508.84	\$1,471.31	\$16.44
<b>Nursing Facilities</b>				
Average # of persons receiving Medicaid funded Nursing Facility svcs. per mo.	56213	56694	56599	(386)
Net Nursing Facility cost per Medicaid resident per month	\$2,981.92	\$3,172.04	\$3,185.18	(\$203.26)
<b>Medicare Skilled Nursing Facility</b>				
Average number of clients receiving Copaid/Medicaid nursing facility services per month	6767	6026	6370	397
Net payment per client for co-paid Medicaid nursing facility services per month	\$2,055.93	\$2,009.70	\$2,029.58	\$26.35
<b>Hospice</b>				
Average # of clients receiving Hospice services per month	7039	6600	6741	298
Average net payment per client per month for Hospice	\$2,739.58	\$2,776.54	\$2,789.27	(\$49.69)
<b>ICFs/MR</b>				
Average Monthly Number of Persons in ICF/MR Medicaid Beds, Total	5602	5608	5604	(2)
Monthly Cost Per ICF/MR Medicaid Eligible Consumer, Total	\$4,360.27	\$4,346.64	\$4,358.28	\$1.99
<b>State School Facilities</b>				
Average Monthly Number of MR Campus Residents	3831	3940	3903	(72)
Average Monthly Cost per MR Campus Resident	\$14,107.11	\$13,716.84	\$13,846.87	\$260.24

**Department of Aging and Disability Services  
 FY 2012 Monthly Financial Report: Waiver Clients Served  
 Data Through the End of February 2012**

<b>DADS Programs</b>	<b>Actual Sept 1, 2011 Client Count</b>	<b>Total number of slots at end of FY 2012</b>	<b>February 2012 Count</b>	<b>FY 2012 Budgeted (average for the Fiscal Year)</b>	<b>Projected FY 2012 Average</b>
Community Based Alternatives (CBA)	19,171	9,768	19,134	14,616	14,616
Comm. Living Assist. & Supp. Svcs. (CLASS)	4,735	4,771	4,639	4,858	4,858
Med. Dep. Children Pgm. (MDCP)	2,299	2,380	2,350	2,396	2,396
Deaf-Blind w/Mult. Disab. (DBMD)	147	156	145	157	157
Home & Comm. Based Svcs. (HCS)	19,752	20,313	19,851	20,167	20,167
Texas Home Living	1,930	5,738	4,335	5,738	5,738

CBA Star+ rollout is expected to begin March 2012